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DATE: September 24, 2008

TO: Examiner Vanessa L. Ford
TC Art Unit: 1645

Fax No.: (571) 273-8300

FROM: Holliday C. Heine, Ph.D.

No. of pages transmitted
(including this page): 11

Our File: BU-096XX

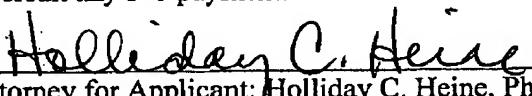
Time: 8:50 pm

Sent by: Holly H.

Application No. 10/535,490
Filing Date: May 17, 2005
Confirmation No.: 3937A confirmation copy of this transmission will not be mailed unless the following is checked: ☐
MESSAGEPLEASE DELIVER DIRECTLY TO:
EXAMINER Vanessa L. Ford, Tel. (571) 272-0857
TC ART UNIT NO: 1645**FOR ENTRY**

Enclosed for filing please find an: Amendment and Three Month Extension of Time

The Commissioner is hereby authorized to Charge Deposit Account No. 23-0804 for any additional filing fees associated with this communication or credit any overpayment.


Attorney for Applicant: Holliday C. Heine, Ph.D.
Registration No. 34,346

372220

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Application No.: 10/535,490
 Filed: May 17, 2005
 TC Art Unit: 1645
 Confirmation No.: 3937

Rev 09/07

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SEP 24 2008

Date: September 24, 2008

Via Facsimile

COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, VA 22313-1450

Attorney
 Docket No.: BU-096XX

Sir:

In re application of: **Caroline A. Genco et al.**Entitled: **IMMUNIZATION WITH PORPHYROMONAS GINGIVALIS PROTECTS AGAINST HEART DISEASE**Transmitted herewith is an **amendment** in the above-identified application. The following checked items are applicable:

- ☐ This is a Request for Continued Examination under §1.114; authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of same (\$) per §1.17(e).
☐ Enter the unentered amendment previously filed on _____ per §1.116.
- ☒ **Small Entity Status is asserted.**
- ☒ A Petition for Extension of Time for 3 months is hereby made under §1.136(a); authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of same (\$525.00) per §1.17.
- ☒ In the event a Petition for Extension of Time is required by this paper and not otherwise provided, such Petition is hereby made and authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of such extension.
- ☐ Other:

CLAIMS AFTER AMENDMENT:	MINUS PRIOR PAID CLAIMS:	EQUALS PRESENT EXTRA CLAIMS:	RATE:	ADDITIONAL FEE:
Independent	3 - 3	=	x \$210.00 =	0
Total	13 - 13	=	x \$ 50.00 =	0
<input type="checkbox"/> Multiple Dependent Claims (1st presentation)			+ \$370.00 =	0
SUBTOTAL ADDITIONAL FEE				
Small Entity filing, divide by 2. Small Entity status must be asserted.				
TOTAL ADDITIONAL FEE				0

- ☒ No additional fee. ☐ The fee has been calculated above; authorization is provided herewith to charge Deposit Account No. 23-0804 (\$) for the cost of same.
- ☒ The Commissioner is hereby authorized to charge payment of any additional filing fees under §1.16 associated with this communication or credit any overpayment to Deposit Account No. 23-0804.

I hereby certify that this correspondence is being sent via facsimile to Examiner Vanessa L. Ford, TC Art Unit 1645, Fax No. (571) 273 8300, on Sept 24, 2008.

Holliday C. Heine
 Attorney of Record: Holliday C. Heine, Ph.D.
 Registration No.: 34,346

HCH/dvm
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